

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addresses entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing, below.

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1. CORRESPONDENCE ADDRESS	15N2/0724
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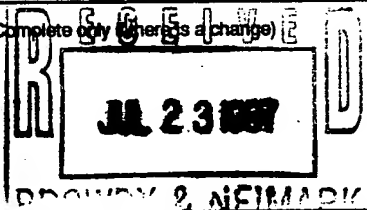
2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
INVENTOR'S NAME
Street Address
City, State and Zip Code
CO-INVENTOR'S NAME
Street Address
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<input type="checkbox"/> Check if additional changes are enclosed

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
06/114,329	09/12/90	042	BAILEY, J	1805 07/21/97
First Named Applicant	CLASSEN, JOHN B.			

TITLE OF INVENTION: METHOD AND COMPOSITION FOR AN EARLY VACCINE TO PROTECT AGAINST BOTH COMMON INFECTIOUS DISEASES AND CHRONIC IMMUNE MEDIATED DISORDERS OR THEIR SEQUELAE

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
CLASSEN1	424-201.100	P43	UTILITY	YES	\$45.00 660.00	10/21/97

3. Correspondence address change (Complete only if there is a change)



4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

- Iver P. Cooper
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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: Classen Immunotherapies Inc.
(2) ADDRESS (CITY & STATE OR COUNTRY): Baltimore, Maryland

A. ☐ This application is NOT assigned.

- ☒ Assignment previously submitted to the Patent and Trademark Office.
☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:	
<input checked="" type="checkbox"/> Issue Fee	<input checked="" type="checkbox"/> Advance Order - # of Copies 10
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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) (Date) 10/12/97

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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Washington, D.C. 20231

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